# **People Select Committee**

A meeting of People Select Committee was held on Monday, 16th April, 2018.

**Present:** Cllr Sonia Bailey, Cllr Louise Baldock, Cllr Gillian Corr, Cllr Elsi Hampton, Cllr Stefan Houghton, Cllr Barbara Inman, Cllr Eileen Johnson, Cllr Mick Moore, Cllr Mrs Jean O'Donnell

Officers: Jane Smith (A&H); Gary Woods, Annette Sotheby (DCE)

Also in attendance: Sarah Ross (Middlesbrough and Stockton Mind), Neil Craig (Samaritans), Tracey Hamilton (Eastern Ravens Trust), Gary Pollard (Men Tell Health)

Apologies: None

#### PEO Evacuation Procedure

1/18

The evacuation procedure was noted.

#### PEO Declarations of Interest

2/18

There were no declarations of interest recorded.

# PEO Scrutiny Review of Mental Health and Wellbeing including Suicide and3/18 Self-Harm

Members received information from voluntary sector representatives regarding their role in service delivery and representation / engagement.

Middlesbrough and Stockton Mind provided an overview of their service, along with details of two specific projects (Open Minds Therapies and Schools in Mind), which could be summarised as follows:

•Affiliated to national Mind, the local service has 120 employees and 95 volunteers – main base is in Middlesbrough, with Stockton office at Marlborough House, Yarm Road.

•From April 2017 – March 2018, 235 clients aged between 16 and 25 (inclusive) in North Tees were referred to the Psychological Therapies Service, and 166 of these attended assessments (155 attended assessments in 2016-2017; 66 attended assessments in 2015-2016).

•Open Minds Therapies: range of brief therapies aimed at people with common mental health problems, including anxiety and depression (low to medium support). Open to people aged 16+, aim is to get them assessed within 24 hours (telephone conversation) – outcome of this determines treatment. Some will have needs beyond the remit of this project - they will be referred to secondary services. 'SilverCloud' (web-based and requiring an email address) will offer secure, immediate access to flexible online programmes designed to help people learn techniques to overcome symptoms of low mood, anxiety and stress (based on cognitive behavioural therapy (CBT)). Will involve regular contact with a Mind worker, and will be publicised via GPs and social media. •Schools in Mind: modelled on the successful HeadStart programme which has run in all schools in Middlesbrough since November 2015, Schools in MIND provides emotional wellbeing sessions to students using a range of interventions based on an individual's needs. Contact made with all primary and secondary schools in Stockton, but not great uptake yet (possibly due to

cost) – one secondary school has signed a contract for a year, with a free pilot agreed with two primary schools.

The main issues discussed were as follows:

•People coming to services later than they should – trying to manage their issue, part of stigma? Message needs to be that it is normal to feel unwell, have anxiety, etc.

•Young people in school are more receptive to approaching Mind – happy to self-refer or be referred by teacher. Less contact from 18-24 year-olds – more difficult to reach.

•Generally more contact from females – males not good at presenting early. •Feedback from young people shows that, whilst they value online support, they prefer to talk face-to-face.

•Will mental health issues lose their importance if they become everyday topics? Demand so great, so unlikely.

•Ample opportunities to access service, but still low referral rates from GPs. Are people getting by on medication – is this what they prefer? Are they being referred elsewhere? Getting information on new services past receptionists / practice managers can be an issue.

•Difficult to separate behavioural and mental health difficulties – these are not the same and can be complex.

•Different Mind offer for schools in Middlesbrough (Public Health-funded emotional support service) compared to Stockton (have to self-fund) – is this fair?

•All services in Mind oversubscribed – need more resources.

Members received further information from the Director of Teesside Samaritans, who presented an overview of what they do, who they support and how they work in the community:

•Samaritans are there for everyone (not just for people who are suicidal), providing the opportunity for people to talk to someone and become stronger to deal with their problems.

•Overarching vision is that fewer people die by suicide, and they work to achieve this by being always available, reaching out to high-risk groups and communities, working in partnerships (signposting where necessary), and influencing public policy.

•A key value involves the notion that if a person comes up with a decision themselves, they are more likely to act on this than if someone else makes that decision for them.

•Samaritans are 'non-establishment', which could be why many people choose to call them.

There is no typical person who contacts Samaritans, and no typical problem that people want to talk about – what matters is what is making that person feel the way they feel, and that they are supported to make their own decisions.
50 volunteers involved with Teesside Samaritans, and it takes a year of intensive training before a volunteer can answer phones themselves. The organisation depends on public and business donations – it is not run on government funding.

•Samaritans make a difference through working in schools (talks, workshops, support if suicide in the community), offering workplace training, partnership work with Network Rail to reduce suicide on the railways, and the provision of a

listening service in Holme House and Kirklevington prisons. Samaritans training is well recognised.

The main issues discussed were as follows:

•There's a place for all types of mental health organisation – people need to know when the best time to talk to someone is, and know how to approach them.

•Concerns expressed around people in the workplace dealing with members of the public who are distressed and in despair without the correct training to do so.

•Financial hardships and relationship problems are common themes, but more striking is the number of people who contact Samaritans with historical issues that have stayed with them – earlier you can get to that person, the easier it will be to prevent subsequent problems.

•Procedure around contact from 13-17 year-olds is to provide confidential support to children, but refer to an appropriate partner (Childline) with caller consent when callers are experiencing specific situations such as those that can cause them serious harm to themselves or others. This would be as well as support from Samaritans, not instead of.

Members received evidence from the Manager of Eastern Ravens Trust, who provided the following information regarding their service:

•Formed in 1961, a key feature of the Trust is its Borough-wide Young Carers Support Service, aimed at under 18s, who provide regular and ongoing care and emotional support to a family member who is physically or mentally ill, disabled or misuses substances.

Young carers provide care that is often inappropriate and excessive for their age, and can experience a lot of negative mental reaction as part of this role.
The service offers young carers a menu of support including a dedicated counselling service (funded through Catalyst and offering face-to-face and online support), support groups, crisis management, respite, school holiday programmes, and a 'young carers card' (form of ID that is supported by the CCG, it is featured in a LGA/Bright Futures 'Meeting the health and wellbeing needs of young carers' case studies document as a form of good practice).
A number of partner agencies are involved with the service including CAMHS, School Nursing, Alliance and SWITCH (Youth Direction). Access to counselling has seen very positive outcomes for both the young person and their parents.

The main issues discussed were as follows:

•Members were encouraged to continue highlighting the service as it is felt there are a lot of hidden carers across the Borough, something which a new funding bid will shortly attempt to address. Raising awareness of the service with schools and GPs was considered key – few referrals are received from the latter.

Members received a presentation from the Chief Executive of Men Tell Health, a national award-winning mental health CIC focusing on men's (18+) mental ill-health and suicide reduction, details of which included:

•Men Tell Health provides local help and support with a difference, using humour as a conscious gateway to engaging men. A huge online resource is available (400+ pages of content), along with a network of men-only 'SpeakEasy' groups (since March 2017) – training and consultancy is also offered to make services more 'man-friendly'.

•Ethos is to treat people with honesty, empathy and understanding, and respect their masculinity and place in the world. Six principles – user-led, honesty (no service will 'fix' you 100%), humour, recovery, positivity, and collaboration not competition.

•Men and women want different things when it comes to support, but they too often get grouped together by traditional services.

•SpeakEasy groups take place in Middlesbrough, Redcar, Yarm, Stockton and Grimsby, with more locations planned locally and nationwide over the next year. Groups involve no cost, no form-filling (men worried that forms would be sent to their partner/employer), and take place in the evening – these three key features reflect feedback from 2,662 men who provided responses to 'what stops you accessing mental health services' (filling in forms 53%; cost 23%; time of day 19%). 'SpeakEasy Live' pilot planned – anonymous live chat via website.

•Try to avoid the term 'support groups' – some have a preconceived idea of what these are, and it turns them away.

The main issues discussed were as follows:

•Issue around masculinity and not wanting to look weak. Males equally in need of support and need to tackle the stigma of them accessing support services. Language used between young men can reinforce old stereotypes.

•Mental health needs to be an everyday topic of conversation, vast spectrum of thoughts and feelings normalised, and men in particular need the right space to be able to talk – different is what is needed, not just the usual organisations doing the same thing and being surprised when things are not changing. Men can often do better once engaged with a service – the challenge is getting them there in the first place.

AGREED that the information be noted.

## PEO Work Programme 2018-2019

## 4/18

Consideration was given to the Committee's Work Programme 2018-2019. The next meeting is on the 23rd April 2018.

AGREED that the Work Programme be noted.

## PEO Chair's Update

#### 5/18

The Chair had nothing further to report.

Noted.